COMBINED DECLARATION AND POWER OF ATTORNEY

Attorney Docket No.

FRIEL-105

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled

PRECISION MEANS FOR SHARPENING AND CREATION OF MICROBLADES ALONG CUTTING EDGES the specification of which

(check one) is attached h	ereto.						
□ was filed on				as	6		
Application Serial No.							
was amended on							
(if applicable)							
was amended through (if applicable)							
		·					
I hereby state that I have reviewed an amended by any amendment referred to	d understand the contents of the abo to above.	ve identified specification	n, inclu	ıding	the cla	aims, as	
I acknowledge the duty to disclose to the Code of Federal Regulations, §1.56.	ne Office all information known to me	e to be material to patental	bility as	defin	ed in 7	Γitle 37,	
I hereby claim foreign priority benefits certificate, or §365(a) of any PCT International application having a filing	ational application which designated by checking the box, any foreign ap	at least one country other the polication for patent or in	han the ventor's	United	1 State	e lieted	
Prior Foreign Application(s)				<u>Pri</u>	ority (Claimed	
				_			
(Number)	(Country)	(Day/Month/Year Filed)	Yes	No			
(Number)	(Country)	(Day/Month/Year Filed)	Yes	No			
(Number)	(Country)	(Day/Month/Year Filed)	Yes	No	_	_	
I hereby claim the benefit under Title 3 as the subject matter of each of the clai provided by the first paragraph of Titl information known to me to be material available between the filing date of the	ms of this application is not disclosed e 35, United States Code, § 112, I to patentability as defined in Title 37	d in the prior United State: acknowledge the duty to Code of Federal Regula:	s applic o disclo	ation: ose to	in the the O	manner ffice all	
(Application Serial No.)	(Filing Date)	(Status)	_				
(Application Serial No.)	(Filing Date)	(Status) (patented, pending, abandoned	-)				
I hereby claim the benefit under 35 U.S.	S.C. §119(e) of any United States pro	visional application(s) lis	ted belo	ow.			
60/457,993 March 2' (Application No.) (filing date)	7, 2003						

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:

In the matter of the above-identified application, please recognize the attorneys associated with CUSTOMER NUMBER 23416; all of CONNOLLY BOVE LODGE & HUTZ LLP, as attorneys with full power of substitution to prosecute this application and conduct all business in the Patent and Trademark Office connected therewith.

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RESIDENCE			CITIZENSIEP					
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